# ADEQ

# **Arkansas Department of Environmental Quality**

COPY OF ORIGINAL

## **Air Application**

for

Registrations,

Minor Source Permits,

or Title V Permits

Form Last Revised June 27, 2018

#### Warning: Electronically combining pdf files may result in data being overwritten.

	quired fields are deno and at:	ted with an asterisk (*). Addition	all instructions for completing this form may be		
		ar.us/webfiles/Air/Instructions/ai	r_permit_application_forms_instructions.htm		
1.	1. It is requested that you electronically submit non-confidential applications using ePortal (https://eportal.adeq.state.ar.us), our online submission system. Please provide an explanation in t paragraph box below as to why you are not submitting this application electronically using ePortal				
	Explanation for Not	Using ePortal:*			
			64. Given the minor infrequent changes to the not be a good use of resources at this time.		
	<del></del>				
2.		ification Number (AFIN):* 03- ility does not have an AFIN.	0002 Indicate "Not		
	Trobigited in time fac				
_					
Se	ection I	General Inforn	nation		
Ap	oplication Type, Curr	ent Registrations or Air Permi	ts, and Changes		
air	permit; the type of ap		nor Source air permit, or a Title V/Major Source ion or air permit numbers; and clearly and ation.		
3.	Select the Type of Pe	ermit:*			
	O Registration	Minor Source Permit	O Title V/Major Source Permit		
4.	Select the Type of Pe	ermit Application or Registration	*		
<ul> <li>O Initial (New) Permit (Includes changes between Minor, Title V, Registrations, and Ger Permit types)</li> <li>O Renewal of Existing Permit (Title V Permits Only)</li> </ul>					
	O Minor Modifications (Title V Permits Only)				
	O DeMinimis (Minor Source Permits Only)				
	Administrative A				
O Initial (New) Registration (Includes changes from Minor, Title V, and General Permit					
	O Registration Mo				

5. List All Changes and Revised Sources Associated with this Application or indicate "None":\*

Specifically identify all changes requested in this application in the paragraph box below. Identify any physical modifications, including increases in the amount or type of throughputs, fuel use, control equipment, or other factors affecting emissions. Also, specifically identify any other requested changes to the permit or permit conditions, including but not limited to recordkeeping requirements, testing, monitoring, emission changes, etc. Because of the complexity of permits, any changes not listed in the paragraph box below may not be reviewed or incorporated into the draft permit.

Baxter is requesting the following updates to its Minor Source Air Permit (0544-AR-15):				
-Correction of the last bullet on page 6 from "Automated Assembly Lines (PVC File Extrusion, Titan, DaVinci)" to Automated Assembly Lines (PVC Film Extrusion, Titan, DaVinci)				
-Clarification that Special Condition 37 references the General Condition 10, as in previous permits				
(a) Expected Jane of Operation in new rood (it is such a feet with Expected to such defrequent				
Air Application contact afterial fice				
In claim caces, the permitted in energy and its upon he will do not all to take permitting and in- semential claim found in permitting to the claim of the second in plant and a former of Art quality requires "Rice of this During to review this payment in the case of the energy of the order and and additional information of will content to a permitted one of the content to the content of the co				
8. An Appendix of Secret Letteration				
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Address				
Address				
Jan Merci				
and the second s				

6.	Does the facility have an active regist  Yes, List Current Active Registra	tration or permit?* ation or Air Permit Number: 0544-AR-15
	O No, there is not an active registra	tion or air permit for this facility
Date	s of Construction/Reconstruction	
e d "	mission units or reconstruction, enter the lates. If a modification does not involve of Not Applicable" and do not enter any da	ifications to the facility involve construction of new e proposed construction or reconstruction and operation construction of new emission units or reconstruction, enter ites. [Note: Permits are generally required before any e Office of Air Quality for more information and exceptions.]
(	a) Expected Date of Commencement of	Construction or Reconstruction:* Not Applicable
(1	b) Expected Date of Completion of Con-	struction or Reconstruction:* Not Applicable
(6	c) Expected Date of Operation of new/n	nodified units:* Not Applicable
Air A	Application Contact Information	
Some Offic additi	one other than the person who signed the e of Air Quality to contact this person. It	s most knowledgeable about the permit application is e application. Information in this section should allow the f this section is blank and the Office of Air Quality requires erson listed as the facility mailing address contact.
Air A	application Contact:	
Pre	fix: First Name:	Last Name:
	e:	
	npany Name:	
Pho	one: Ext:	Fax:
	ail:	
Air A	pplication Contact Address:	
Ado	dress Line 1:	
	y:	
Stat		Country:

## **Section II**

## **Applicant Information**

Facility Information	
Please provide the following information about the Facility.	
9. Legal Name - Facility Name:*	
Baxter Healthcare Facility	Tide
10. Please provide the North American Industry Classification System of your facility. (www.census.gov/eos/www/naics/)	n (NAICS) codes and descriptions
(a) Primary NAICS Code and Description:*	
326113 - Unlaminated Plastics Film and Sheet Manufacturing	Email: * Savi Bestnang Barta
(b) Secondary NAICS Code and Description:	
(c) Tertiary NAICS Code and Description:	Address Line 2
Postur Toder 72553	City-1 Mountain Home
ASU Divines in	后人 1. <b>20</b> 10日
11. Facility Physical Address	
Physical Address:	
Street Address or Location (if a street address is not available, please	e provide directions):*
1900 North Highway 201	
City:* Mountain Home Postal Code:	:* <b>72653</b>

#### Facility Physical Location Latitude and Longitude

County:\* Baxter

Please use the NAD 83 Latitude/Longitude Coordinates. Latitude and Longitude coordinates must be	e
entered in decimal degrees, using a negative value for the longitude (ex. 42.922846, -75.602681).	

12. Latitude:\* 36.358227 Longitude:\* -92.387182

Mailing Contact:  Prefix: First Name:* Kevin	13. Facility Mailing Address	
Title:  Company Name:  Phone:* 870.424.5403 Ext: Fax:  Email:* Kevin_Beckham@Baxter.com  Mailing Address:  Address Line 1:* 1900 North Highway 201	Mailing Contact:	
Company Name:  Phone:* 870.424.5403 Ext: Fax:  Email:* Kevin_Beckham@Baxter.com  Mailing Address:  Address Line 1:* 1900 North Highway 201	Prefix: First Name:* Kevin	Last Name:* Beckham
Phone:* 870.424.5403 Ext: Fax:  Email:* Kevin_Beckham@Baxter.com  Mailing Address:  Address Line 1:* 1900 North Highway 201	Title:	
Email:* Kevin_Beckham@Baxter.com  Mailing Address:  Address Line 1:* 1900 North Highway 201	Company Name:	and the second s
Mailing Address:  Address Line 1:* 1900 North Highway 201	Phone:* 870.424.5403 Ext:	Fax:
Address Line 1:* 1900 North Highway 201	Email:* Kevin_Beckham@Baxter.com	
	Mailing Address:	
Address Line 2:	Address Line 1:* 1900 North Highway 201	· .
	Address Line 2:	
City:* Mountain Home Postal Code:* 72653	City:* Mountain Home	Postal Code:* 72653
State:* AR Country:* USA	State:* AR	Country:* USA

#### **Billing Information**

Please provide the following information for the Billing contact for this permit application.

NOTE: The Facility Mailing Contact and Address will be used for the Billing Information unless another contact and address are provided below.

Last Name:
oranio, vito solintant magazovel) (app.) (C)
O State Georgians
Fax:
O General Paragonship (games of names a
C ('numer Fraction decreases to a mark C
Conscration (Domestic or Ewergs, inclu-
Lynaghano
Postal Code:
Country:

#### **Organizational Information**

Please provide the following information for the applicant. If the applicant is a Corporation, Limited Liability Company, or Limited Partnership; your legal name must exactly match the name registered with the Arkansas Secretary of State. The Secretary of State information is not required for Administrative Amendments.

All Corporations, Limited Liability Companies (LLC), and Limited Partnerships (LP, LLP, and LLLP) must be registered and in good standing with the Arkansas Secretary of State and the state of origin (if other than Arkansas).

Follow the link to view the Secretary of State name listing:

http://www.sos.arkansas.gov/corps/search all.php

15.	Legal Organization:*
	O Local Government (includes city, county, PID, SWD, SID and school district)
	O State Government
	O Federal Government
	O Solely Owned Proprietorship (includes individual and individual d/b/a company)
	O General Partnership (names of partners are required on the Disclosure Statement)
	O Limited Partnership (includes LP, LLP, LLLP)
	O Limited Liability Company
	<ul> <li>Corporation (Domestic or Foreign, includes for-profit, nonprofit, and corporation d/b/a company)</li> </ul>
	O Cooperative
16.	Is the applicant registered with the Arkansas Secretary of State?*
	● Yes, Enter Arkansas Secretary of State's Filing Number: 100057686
	O No, the applicant is not registered with the Arkansas Secretary of State
17.	If the applicant is registered with the Arkansas Secretary of State, indicate if it is domestic (Arkansas) or foreign (chartered outside of Arkansas).*
	O Domestic (Arkansas)
	Foreign (Chartered Outside of Arkansas)
	O Applicant is a Government Entity, Solely Owned Proprietorship, General Partnership, or
	Cooperative

Origin. This can be a current Certificate of Good Standing or other proof such as a currently dated webpage status listing from the State of Origin. The proof is not required for Administrative
Amendments.
Proof of Good Standing:
O Attached
O Not applicable because the applicant is domestic (state of origin is Arkansas)
O Not applicable because the applicant is a Government Entity, Solely Owned Proprietorship,
General Partnership, or Cooperative
Not applicable because this is an Administrative Amendment
Disclosure Statement or Securities and Exchange Commission (SEC) Reports (Required for Initia Permits and Renewals)
Arkansas Code Annotated § 8-1-106 requires that all applicants for the issuance or transfer of any permit submit a disclosure statement with their applications. Some exceptions apply (refer to the form for details). The disclosure form is a separate form and can be obtained by using the link below: https://www.adeq.state.ar.us/ADEQ_Disclosure_Statement.pdf
19. Attach the Disclosure Statement or SEC Annual and Quarterly Reports*
For publicly held companies, attach the most recent annual and quarterly Securities and Exchange Commission reports. Other entities, attach the up-to-date disclosure statement.
Disclosure Statement/Reports:
O Attached
<ul> <li>Not applicable because this is an Administrative Amendment, DeMinimis, Minor</li> </ul>
Modification, or Significant Modification
O Not applicable because the applicant is an exempt government entity

18. Attach the Current Certificate of Good Standing from the State of Origin (If Not Arkansas).\*

If foreign (chartered outside of Arkansas), attach proof of current Good Standing from the State of

Provide the information below for the person under whose signature this form will be certified and submitted when completed. This person must be a responsible official. "Responsible Official" is defined in Section XII of this form.

(a) Name of Responsible Official Signing this Application:\*

Kevi	in Beckham			<u></u>	n at a sign
(b) '		t Manager Interim			A. W
(c) (		Baxter Healthcare Corporation	i salque	1000	

#### 21. Attach the Delegation of Authority Letter\*

If the Responsible Official has been delegated that authority, attach a copy of the delegation of authority letter. By regulation this should be submitted and approved before completing this application.

Delegation of Authority:

- Attached
- O Not applicable because the applicant is a partnership, sole proprietorship, or government entity and therefore cannot delegate
- O Not applicable because the applicant is a corporation and the person signing this application is a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function
- O Not applicable because the applicant is a corporation and the person signing this application performs policy or decision-making functions for the corporation similar to the president, secretary, treasurer, or vice-president of the corporation

## **Section III**

## **Registration Information**

Check here if this section is skipped because the applicant is not applying for a Registration but is applying for a permit.

Tot	tal Actual Emissions (Required for Registrations)	ing well on while an income	
22.	Enter the total actual emissions from the facility:		
	(a) PM (tons per year)		
	(b) PM <sub>10</sub> (tons per year)		
	(c) SO <sub>2</sub> (tons per year)		
	(d) VOC (tons per year)		
	(e) CO (tons per year)		
	(f) NO <sub>X</sub> (tons per year)	ी खाइना विद्या विद्या	
	(g) Lead (tons per year)		
		eres al appleadon	
	(h) Single Hazardous Air Pollutant (tons per year)	Highly 41 Tab	
	(i) Total Hazardous Air Pollutants (tons per year)		
	(1) Total Hazardous All Foliutains (tolls per year)		
	(j) Air Contaminants (tons per year)		

## **Section IV**

## **Title V Information**

Check here if this section is skipped because the applicant is not applying for a Title V (Major Source) Initial Permit, Title V Modification, Title V Minor Modification, or Title V Renewal.

Neighboring States 23. If the facility location is within fifty miles of a neighboring state, select the	O Kansas
applicable states. Otherwise, select "No State within 50 Miles".	O Kentucky
	O Louisiana
	O Mississippi
	O Missouri
	Oklahoma
	O Tennessee
	O Texas
	ONo State within 50 Miles
Compliance Plan and Schedule	
24. Compliance Plan and Schedule  When you submit this application you will be required to certify that the facility is in compliance or that a compliance schedule is attached. A compliance plan and schedule that meets the requirements of Reg.26.402(B)(8) and (9) is required for all facilities not in compliance with all requirements. This includes if the permittee is out of compliance with the current permit or out of compliance with applicable subparts whether or not they are listed in the permit. This also includes if a subpart became applicable before the last renewal application was due and the subpart was not included in the last renewal permit.	<ul><li>Attached</li><li>Facility is in Compliance</li></ul>

Compliance Assurance Monitoring Plan  25. If any source is subject to the Compliance Assurance Monitoring (CAM) provisions of 40 C.F.R. § 64, attach the CAM plan. Additional information regarding CAM may be found at:  https://eportal.adeq.state.ar.us/webfiles/Air/Instructions/Air_Permit_Application_Forms_Instructions.htm#CAM	O Attached O Not applicable because no source has precontrol emissions exceeding a major source threshold
coders on reference is agreement contact to the property of the contact to the co	O Not applicable because no source uses a
ne de de la completa del completa de la completa de la completa del completa de la completa del completa de la completa de la completa del completa de la completa del comp	control device to achieve compliance with an emission limit or standard
en al esta in concept and the service and an area are	
e pilitae)  estifice e and incompilance	deadline under 40 C.F.R. § 64.5 has not occurred
with § 112m the properties of the facility of the facility is not subject to	O Not applicable because exempt per 40 C.F.R. § 64.2(b)
§ 112(g) Applicability  26. Indicate if the facility will engage in construction or reconstruction that will req application and attach the § 112(g) application if applicable.	uire a § 112(g)
Will the facility engage in construction or reconstruction that will require a \$ 112(g) application?	O Yes and the § 112(g) Application is attached
brelesin si naig	O No, § 112(g) is not applicable because the source is not major for HAPs
	O No, § 112(g) is not applicable because the source that is major for HAPs has an applicable MACT

Title VI Applicability (Ozone Depleting Chemicals)  27. Facilities that deal with ozone depleting chemicals will have additional require permit. The items below determine Title VI applicability. Select "yes" or "no" second item, if the refrigeration charge of the unit is unknown, contact the equipal vendor to obtain this information.	for each item. For the
(a) Does the facility have any air conditioners or refrigeration equipment that uses CFCs, HCFs or other ozone depleting substances?	O Yes
	O No
(b) Does the air conditioner or refrigeration equipment contain a refrigeration charge greater than 50 pounds per unit? In general, household size refrigerators and air conditioners will have a charge of	O Yes
less than 50 pounds per unit.	O No
(c) Do facility personnel maintain, service, repair or dispose of any motor vehicle air conditioners or appliances (as defined in 40 C.F.R. § 82.152)?	O Yes
	O No
Accidental Release Applicability 28. Indicate if the facility is subject to the Accidental Release Prevention requiremedican Air Act.  Is the facility subject to and in compliance with the Accidental Release	ents of § 112 (r) of the
Prevention requirements of § 112(r) of the Clean Air Act?	O Yes, this facility is subject to and in compliance with § 112(r) requirements O No, this facility
	is not subject to § 112(r) requirements
	O No, this facility is not in compliance and a § 112(r) compliance plan is attached
Section 19 Company of the Company of	

	d Rain Permit Application, Phase II NO <sub>x</sub> Compliance Plan, Averaging Plan (if applicable) attached to the current	O Yes
permit?	Averaging Finn (it applicable) attached to the edition	O No, the latest version is attached to this application O No, the facility is not subject to the Acid Rain provisions
30. If the facility is su	ution Rule/Transport Rule bject to the Cross-State Air Pollution Rule/Transport Rule (T	
A copy of the form	the up-to-date Description of TR Monitoring Provisions Tab n can be obtained at: q.state.ar.us/webfiles/Air/Forms/Transport_Rule	ole attached.
A copy of the form https://eportal.ade	n can be obtained at:	O Yes
A copy of the form https://eportal.ade  Is the latest Descri	n can be obtained at: q.state.ar.us/webfiles/Air/Forms/Transport_Rule	
A copy of the form https://eportal.ade  Is the latest Description	n can be obtained at: q.state.ar.us/webfiles/Air/Forms/Transport_Rule	O Yes O No, the latest version is attached to this
A copy of the form https://eportal.ade  Is the latest Description	n can be obtained at: q.state.ar.us/webfiles/Air/Forms/Transport_Rule	O Yes O No, the latest version is attached to this application O No, the facility is not subject to the TR
A copy of the form https://eportal.ade  Is the latest Describer current permit?	n can be obtained at: q.state.ar.us/webfiles/Air/Forms/Transport_Rule	O Yes O No, the latest version is attached to this application O No, the facility is not subject to the TR monitoring

## Section V Prevention of Significant Deterioration (PSD) Information

Check here if this section is skipped because the applicant is not applying for a Title V (Major Source) Permit.

Indicate the applicability of PSD and provide any required information for PSD review.

Indicate if the facility will engage in construction, reconstruction, or modification requiring a Prevention of Significant Deterioration (PSD) permit.  31. Will the facility engage in construction, reconstruction, or modification that will require PSD review?  PSD Analyses (Required for PSD Applications)  If this application requires PSD review, submit the following information.  32. Completed Request for Applicability of Class I Area Modeling  Analysis Form  A copy of this form maybe be obtained at:  https://eportal.adeq.state.ar.us/webfiles/Air/Forms/PSD_Modeling  O Not applicable because this application does not require PSD review  33. BACT Analysis  O Attached  O Not applicable because this application does not require PSD review  34. Other PSD Analyses (Increment, NAAQS, Visibility, Soils, Vegetation, and	PSD Applicability	i i
modification requiring a Prevention of Significant Deterioration (PSD) permit.  31. Will the facility engage in construction, reconstruction, or modification that will require PSD review?  PSD Analyses (Required for PSD Applications) If this application requires PSD review, submit the following information.  32. Completed Request for Applicability of Class I Area Modeling Analysis Form A copy of this form maybe be obtained at: https://eportal.adeq.state.ar.us/webfiles/Air/Forms/PSD_Modeling  O Not applicable because this application does not require PSD review  33. BACT Analysis  O Attached O Not applicable because this application does not require PSD review  34. Other PSD Analyses (Increment, NAAQS, Visibility, Soils, Vegetation, and	Indicate if the facility will engage in construction, reconstruction, or	O Yes
31. Will the facility engage in construction, reconstruction, or modification that will require PSD review?  PSD Analyses (Required for PSD Applications)  If this application requires PSD review, submit the following information.  32. Completed Request for Applicability of Class I Area Modeling Analysis Form A copy of this form maybe be obtained at: https://eportal.adeq.state.ar.us/webfiles/Air/Forms/PSD_Modeling  O Not applicable because this application does not require PSD review  33. BACT Analysis  O Attached O Not applicable because this application does not require PSD review  34. Other PSD Analyses (Increment, NAAQS, Visibility, Soils, Vegetation, and		
will require PSD review?  PSD Analyses (Required for PSD Applications)  If this application requires PSD review, submit the following information.  32. Completed Request for Applicability of Class I Area Modeling Analysis Form A copy of this form maybe be obtained at: https://eportal.adeq.state.ar.us/webfiles/Air/Forms/PSD_Modeling  O Not applicable because this application does not require PSD review  33. BACT Analysis  O Attached O Not applicable because this application does not require PSD review  34. Other PSD Analyses (Increment, NAAQS, Visibility, Soils, Vegetation, and	permit.	O No
will require PSD review?  PSD Analyses (Required for PSD Applications)  If this application requires PSD review, submit the following information.  32. Completed Request for Applicability of Class I Area Modeling Analysis Form A copy of this form maybe be obtained at: https://eportal.adeq.state.ar.us/webfiles/Air/Forms/PSD_Modeling  O Not applicable because this application does not require PSD review  33. BACT Analysis  O Attached O Not applicable because this application does not require PSD review  34. Other PSD Analyses (Increment, NAAQS, Visibility, Soils, Vegetation, and	31. Will the facility engage in construction, reconstruction, or modification that	
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32. Completed Request for Applicability of Class I Area Modeling Analysis Form A copy of this form maybe be obtained at: https://eportal.adeq.state.ar.us/webfiles/Air/Forms/PSD_Modeling  33. BACT Analysis  O Attached O Not applicable because this application does not require PSD review  Attached O Not applicable because this application does not require PSD review  34. Other PSD Analyses (Increment, NAAQS, Visibility, Soils, Vegetation, and	PSD Analyses (Required for PSD Applications)	
Analysis Form A copy of this form maybe be obtained at: https://eportal.adeq.state.ar.us/webfiles/Air/Forms/PSD_Modeling  O Not applicable because this application does not require PSD review  O Not applicable because this application does not require PSD review  Attached O Not applicable because this application does not require PSD review  O Not applicable because this application does not require PSD review	If this application requires PSD review, submit the following information.	
A copy of this form maybe be obtained at: https://eportal.adeq.state.ar.us/webfiles/Air/Forms/PSD_Modeling  O Not applicable because this application does not require PSD review  33. BACT Analysis  O Attached O Not applicable because this application does not require PSD review  34. Other PSD Analyses (Increment, NAAQS, Visibility, Soils, Vegetation, and	32. Completed Request for Applicability of Class I Area Modeling	
https://eportal.adeq.state.ar.us/webfiles/Air/Forms/PSD_Modeling  O Not applicable because this application does not require PSD review  O Attached O Not applicable because this application does not require PSD review  34. Other PSD Analyses (Increment, NAAQS, Visibility, Soils, Vegetation, and	Analysis Form	O Attached
https://eportal.adeq.state.ar.us/webfiles/Air/Forms/PSD_Modeling  O Not applicable because this application does not require PSD review  O Attached O Not applicable because this application does not require PSD review  34. Other PSD Analyses (Increment, NAAQS, Visibility, Soils, Vegetation, and	A copy of this form maybe be obtained at:	and the first of
O Attached O Not applicable because this application does not require PSD review  34. Other PSD Analyses (Increment, NAAQS, Visibility, Soils, Vegetation, and	https://eportal.adeq.state.ar.us/webfiles/Air/Forms/PSD_Modeling	because this application does not require PSD
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Associated Growth) O Attached	Associated Growth)	O Attached
O Not amplicable		O Not amplicable
O Not applicable because this		
application does		
not require PSD		
review		
1041044		1041044

## Section VI Applicable Federal Regulations

✓ Check here if this section is skipped because the applicant i	s applying for an Administrative
Amendment.	
Check here if this section is skipped because the applicant i 61, or 63 federal regulations.	s not subject to any 40 C.F.R. §§ 60,
Please identify all 40 C.F.R. §§ 60, 61, and 63 federal regulations the additional Applicable Federal Regulations please repeat this page.	boreants have such as borders as
*Required for All Applications Except Administrative Amendments	Sed upper legistem ethnosels bloods a bathay of exceptor clock standy of

35. Identify Each and Every Federal Regulation, 40 C.F.R. § 60 NSPS or 40 C.F.R. §§ 61 or 63 NESHAP, to which the facility is subject; including new or existing sources. List each federal regulation in separate line items or indicate "None". Also, identify whether the indicated federal regulation is applicable only to specific sources or facility-wide. If only to specific sources, identify which source numbers. If the source(s) listed are new or modified, if the subpart is newly applicable, or if this is a renewal application, attach a detailed list of the applicable provisions of the subpart. A copy of the subpart with the applicable sections highlighted or otherwise indicated is preferred.

Applicable Federal Regulation Affected Sources		Applicable Provisions		
		O Attached		
		O Not applicable because this is not a Renewal or Initial application and the affected sources are not new or modified		
	K	O Not applicable because this is not a Renewal or Initial application and the subpart is not newly applicable		
		O Not applicable because this an Administrative Amendment		
		O Attached		
		O Not applicable because this is not a Renewal or Initial application and the affected sources are not new or modified		
		O Not applicable because this is not a Renewal or Initial application and the subpart is not newly applicable		
		O Not applicable because this an Administrative Amendment		
		O Attached		
		O Not applicable because this is not a Renewal or Initial application and the affected sources are not new or modified		
		Not applicable because this is not a Renewal or Initial application and the subpart is not newly applicable		
_		O Not applicable because this an Administrative Amendment		
		O Attached		
		O Not applicable because this is not a Renewal or Initial application and the affected sources are not new or modified		
		Not applicable because this is not a Renewal or Initial application and the subpart is not newly applicable		
		O Not applicable because this an Administrative Amendment		

#### **Process Information**

# **Process Description (Required for All Applications Except Administrative Amendments)**

36. Process Description\*

A written description of the process by NAICS number must accompany each application. This must include a description of each relevant piece of equipment and process. The description must be in sufficient detail to provide the permit engineer an understanding of the process. The applicant should place special emphasis on any process or equipment with the potential to emit any pollutants to the atmosphere. The process description should describe material flow between processes (if any) and the stack (SN) to which each process is vented should be identified in the narrative. The applicant should describe any work practice standards used to control emissions.

O Attached

Not applicable because this is an Administrative Amendment that does not change the Process Description

# Process Flow Diagram (Required for All Applications Except Administrative Amendments)

37. Process Flow Diagram\*

The process flow diagram must be in sufficient detail to understand the general process. The process flow diagram must clearly identify all relevant processes or pieces of equipment. All points where raw materials and/or chemicals are introduced into the process and all points where intermediate and/or finished products are removed from the process must be clearly identified with quantities of materials shown. The process flow diagram should show material flow between processes (if any) and the applicant should identify the source number (SN) on the diagram.

O Attached

Not applicable because this is an Administrative Amendment that does not change the Process Flow Diagram

#### **Operating Scenarios (If Any)**

Required for All Applications Except Registrations and Administrative Amendments

Describe in the paragraph box below all alternate operating scenarios the applicant desires for this facility or indicate "none". Submit a complete set of attachments (i.e. process flow diagrams, process description, emissions calculations, emission rate tables, etc.) for each desired operating scenario. Note: The permittee may implement any alternative operating scenarios allowed by the permit without incurring a permit modification, thus minimizing delays in production. The permit will allow only those operating scenarios specifically described in the application. Alternate operating scenarios may include the desire to permit two fuels, such as natural gas and No. 2 fuel oil, for a boiler or it may involve the option to produce product X or product Y from the same manufacturing line.

38.	Does	this	facility	have alternate	operating	scenarios?*
-----	------	------	----------	----------------	-----------	-------------

O Yes, Describe the	e Alternate Operating Scenarios:
C in applicable because this is a because this is a because this is a because this is a construction.	
O Attriction  O Nor explicable  occurse the in  Administrative  Lie stironts  Mance  Mance  Mance  Mance  Mance	USGS Area Man (Required for habits) Presents, Ready als part Modifications level in g New Property; 40 USGS Area Man Attach one U.S. Gastogical Survey tomograph. Property Science arise) with the breat on of the factors undecated.

- O No, this facility does not have any Alternate Operating Scenarios
- Not applicable because this is an Administrative Amendment or Registration

## **Site Information**

Plot Plan (Required for Initial Permits, Renewals, New Equipment, or Moved Equipment)  39. Plot Plan*  Attach the plot plan that shows the property to scale, indicates the location of the property boundaries with the applicable scale, the location of all sources of any air pollutants (identified by source number), true north direction, and any other relevant information.	O Attached  Not applicable because this is an Administrative Amendment, DeMinimis, Minor Modification, or Significant Modification with no new equipment or no moved equipment  O Not applicable because this is a Registration
USGS Area Map (Required for Initial Permits, Renewals, and Modifications Involving New Property) 40. USGS Area Map* Attach one U.S. Geological Survey topographic map (7.5-minute series) with the location of the facility indicated.	O Attached  Not applicable because this is an Administrative Amendment, DeMinimis, Minor Modification, or Significant Modification that does not involve new property  Not applicable because this is a Registration

41. Description of the	e Property*	O Attached
		an
Attached  A Non applicable because this is a  A derinastrative Amendansis with no change to canissions	region of the filter cas and and countries the countries of the contries of the contries of the contries of the countries of	Amendment, DeMinimis,
	and the emission calculations are be fined to an authorized the state of the state	

## **Section IX**

### **Emission Information**

For any new source, modified source, or source affected by this application; provide the information in Items #42 through #45. New/Initial Permit applications and Renewal applications will need to provide this information for the entire facility.

Ska	
Emission Calculations (Required for All Applications Except Administrative Amendments if No Changes to Emissions)  42. Emission Calculations*  Provide detailed calculations for the emissions of the pollutants. The calculations must contain a detailed explanation of the source of the emission estimation. Please retain all sources in the emission calculations. While calculations are required for revised sources, calculations for all sources at the facility are preferred. Any calculations included in a spreadsheet format must also include a detailed sample calculation. Additional instructions for the emission calculations may be found at: https://eportal.adeq.state.ar.us/webfiles/Air/Instructions/Emission_Calc_Tips.pdf	<ul> <li>Attached</li> <li>Not applicable because this is an Administrative Amendment with no change to emissions</li> </ul>
Emission Rate Tables (Required for All Applications except Administrative Amendments and Registrations)  43. Completed Emission Rate Tables*  The applicant must complete an Emission Rate Table form for each significant (i.e., not an insignificant activity) air pollutant emission source located at a facility. An emission source is any point at a facility which emits, or is capable of emitting, an air contaminant into the atmosphere. The definition of an air contaminant is any emission except water vapor, oxygen, or nitrogen. Complete a separate emission rate table for each proposed operating scenario, using the same source number for each emission source. Download the emission rate table form at: https://eportal.adeq.state.ar.us/webfiles/Air/Forms/ERT	<ul> <li>○ Attached</li> <li>○ Not applicable because this is an Administrative Amendment or Registration</li> </ul>
HAP Emission Rate Tables (Required for All Applications except Administrative Amendments and Registrations)  44. Completed HAP Emission Rate Tables* The applicant must complete a Hazardous Air Pollutant (HAP) Emission Rate Table form for each emission source capable of emitting a significant quantity of HAPs. The applicant must complete a separate HAP Emission Rate Table for each emission source. Some listed HAPs are general names for groups of compounds. In such case, list the actual emitted compound. Download the HAP emission rate table form at: https://eportal.adeq.state.ar.us/webfiles/Air/Forms/HAP_ERT	<ul> <li>Attached</li> <li>Not applicable because this is an Administrative Amendment or Registration</li> </ul>

Insignificant Activities (Required for All Applications Except for Registrations and Modification Applications that Do Not Involve the Insignificant Activity List)

- 45. Completed Insignificant Activities Form and Calculations (If Applicable)\* Insignificant activities are sources that emit pollutants but need not be included as specific sources in the permit with specific conditions. There are two types, Group A and Group B insignificant activities. These can be found in Regulation 18 or 19 (identical). Group A activities are required to be included in the permit application and are evaluated by the Department. These will appear in a final permit as a list of Insignificant Activities. Activities listed in Appendix B of these regulations do not generally need to be quantified or included in permit applications. Group A Insignificant Activities cannot have any federal requirements, require any recordkeeping or in general have conditions that need to be tracked. The entire source must be insignificant, i.e. you cannot have part of a source's emissions insignificant and another part subject to permitting. Attach completed forms for the insignificant activities type at your facility and attach calculations for categories that have a maximum emission rate limit. For insignificant activities categories that have a maximum emission rate limit, the tpy sum cannot exceed the maximum emission rate. Download the insignificant activities form at:
- Attached
- O Not applicable because this is a Registration
- Not applicable because this is a Modification or Administrative Amendment application that does not involve the insignificant activities list

https://eportal.adeq.state.ar.us/webfiles/Air/Forms/Insignificant\_Activity

## Section X

## **Equipment Forms**

New/Initial Permit applications and Renewal applications will need to provide the following information for the entire facility.

Internal Combustion Engine Summary  46. Completed Internal Combustion Engine Summary Forms*  If you have any new or modified internal combustion engines at your facility, attach the completed Internal Combustion Engine Summary Form.  A copy of this form may be found at:  https://eportal.adeq.state.ar.us/webfiles/Air/Forms/Engine	<ul> <li>Attached</li> <li>Not applicable because this is an Administrative Amendment or Registration</li> <li>Not applicable because this application does not involve engines</li> </ul>
Control Equipment Operating Parameters (Required for All Applications Except Registrations and Administrative Amendments) 47. Completed Control Equipment Operating Parameters Forms* If you have any new or modified control equipment, attach the completed Control Equipment Operating Parameters Forms. A copy of this form may be found at: https://eportal.adeq.state.ar.us/webfiles/Air/Forms/Control_Equipment	<ul> <li>Attached</li> <li>Not applicable because this is an Administrative Amendment or Registration</li> <li>Not applicable because this application does not involve referenced control equipment</li> </ul>
48. Completed Storage Tank Summary Forms*  Complete the Storage Tank Information Form for all new or modified storage tanks emitting regulated pollutants that are not Insignificant Activities. A copy of this form may be found at:  https://eportal.adeq.state.ar.us/webfiles/Air/Forms/Storage_Tank	<ul> <li>Attached</li> <li>Not applicable because this is a Registration</li> <li>Not applicable because this application does not involve any storage tanks that are not insignificant activities</li> </ul>

**Equipment Specifications (Required for All Applications Except** Administrative Amendments and Modifications that Do Not Involve New O Attached Construction or Do Not Change the Manner in which the Current Process Not applicable because Operates) this is an 49. Equipment Specifications\* Administrative Include engineering drawings, operating parameters, manufacturer's specifications, and other information as requested for each new or modified Amendment or Modification that Does piece of equipment directly related to the emission of pollutants to the Not Involve New atmosphere. It is not necessary to submit specifications for equipment not Construction or Does relevant to air pollution. Not Change the Manner in which the Current **Process Operates** 

#### Section XI

#### **Additional Information**

Provide the below additional information as related to this permitting action, where applicable. This is not required for Registrations and Administrative Amendments. New/Initial Permit and Renewal applications will need to provide this information for the entire facility.

#### **Continuous Emissions Monitoring Systems and Testing**

List all Continuous Emissions Monitoring Systems (CEMS) currently used for determining compliance with regulatory requirements. Additionally, list all existing periodic testing requirements currently used or proposed for determining compliance with regulatory requirements (for example, EPA Method 7E to be used for testing NOx emissions annually). This list should contain the appropriate source number for which the CEMS and/or periodic testing requirements pertain, the pollutant(s) for which the requirement is applicable, the required testing frequency or reporting frequency, and any other relevant information.

50.	Does this facility have any CEMS or periodic testing requirements for determining compliance w	ith
	regulatory requirements?*	

O Yes, List the Continuous Emissions Monitoring Systems and Testing:		

No, this facility does not have any CEMS or periodic testing requirement for determining compliance with regulatory requirements

Suggested Specific Conditions 51. Suggested Specific Conditions*  If you have any specific conditions that you would like to propose, attach them.	<ul><li>Attached</li><li>No Suggested Specific Conditions</li></ul>
Other Information 52. Other Information* If you have any other information that you would like to submit for review, attach it.	O Attached  No Other Information

Click Here to Check Completion of Required Fields

Click Here to List Attachments that Should be Attached to This Application

#### Section XII Certification of Application

#### \*COMPLETE FOR ALL REGISTRATIONS AND APPLICATIONS

"Responsible Official" means one of the following:

Address of preparer's firm

- 1) For a corporation: a president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy or decision-making functions for the corporation, or a duly authorized representative of such person if the representative is responsible for the overall operation of one or more manufacturing, production, or operating facilities applying for or subject to a permit and either:
  - (i) the facilities employ more than 250 persons or have gross annual sales or expenditures exceeding \$25 million (in second quarter 1980 dollars); or
  - (ii) the delegation of authority to such representative is approved in advance by the permitting authority (a copy of this delegation of authority must be attached);
- (2) For a partnership or sole proprietorship: a general partner or the proprietor, respectively;
- (3) For a municipality, State, Federal, or other public agency: either a principal executive officer or ranking elected official. For the purposes of this part, a principal executive officer of a Federal agency includes the chief executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., a Regional Administrator of EPA).

I certify under penalty of law that this application and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of

my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. Kevin Beckham Plant Manager Interim typed/printed name of responsible official title 4/10/19 signature of responsible official (A copy of any delegation of authority must be attached) Environmental Resources Management, Inc. Jeff Twaddle typed/printed name of person preparing application firm or company 5000 Meridian Boulevard Suite 300 Franklin, Tennessee 37067 615.656.4636

telephone number (including area code)



March 13, 2019

Ms. Paula Parker
Arkansas Department of Environmental Quality
Air Division
5301 Northshore Drive
North Little Rock, AR 72118-5317

Subject:

**Baxter Healthcare Corporation** 

1900 North Highway 201, Mountain Home, Baxter County, AR 76653

Permit No. 0544-AR-15

Clerical Update

Dear Ms. Parker:

Baxter Healthcare Corporation (Baxter) owns and operates a manufacturing facility located at 1900 Highway 201 North, Mountain Home, Baxter County, Arkansas (facility). The facility manufactures peritoneal dialysis disposables and patient connectors. The facility also produces plastics for the manufacturing of these disposables. Baxter wishes to update the following administrative changes in the newly issued permit:

- Correction of the address on the first page from "1900 north Highway 201 North" to 1900 Highway 201 North
- Correction of the mailing address on page 4 from "1900 north Highway 201 North, Mountain Home, AR 72653" to 1900 Highway 201 North, Mountain Home, AR 72653
- Correction of the last bullet on page 6 from "Automated Assembly Lines (PVC File Extrusion, Titan, DaVinci)" to Automated Assembly Lines (PVC Film Extrusion, Titan, DaVinci)
- Clarification that Special Condition 37 references the General Condition 10, as in previous permits

Baxter understands that these changes will be made at the next permit revision and Baxter will maintain a copy of this letter with the current permit. Please contact Tina Kincade at 870.424.5247 if you have any further questions.

Sincerely,

Kevin Beckham, Plant Manager Interim

Baxter Healthcare Corporation

Kevin Beckhan

Cc: Tina Kincade, Baxter Kevin Beckham, Baxter Jeff Twaddle, ERM Monica Rudowski, ERM

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